								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECO													
Effective October 1, 2003								10 688.878						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER SMALL			
TOTAL CLAIMS							- 1	RATE	FEE] [RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			g minus 20=		. 18			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			3 minus 3 =		· @			X43=		OR	X86=			
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=			
• If	the difference	in column 1 is	less than zero, enter "0" in column 2			column 2		TOTAL	42.5	OR	TOTAL			
CLAIMS AS AMENDED - PART II										-	OTHER	THAN		
/	10-21-17 (Column 1) (Column 1)					(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 8	Minus	2	0	= /		X\$ 9=		OR	X\$18=			
	Independent	. 3	Minus	***	3	= /		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				CLAIM			+145=		OR	+290=			
1,7,8							L	TOTAL ODIT, FEE			TOTAL ADDIT: FEE			
		(Column 1)		(Colum	nn 2)	(Column 3)	_	DUN. FEE	-	•	AUDII. FEE			
AMENDMENT B		CLAIMS REMAINING		HIGH	EST	PRESENT	1 ſ		ADDI-	1		ADDI-		
		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	±	Minus	strate .		=		X\$ 9=		OR	X\$18=			
	Independent	•	Minus	***				X43=		OR	X86≈			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=			
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
S١		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	##				X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		•		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH				
+145= OR +290=														
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL ADDIT. FEE OP ADDIT.														
		mber Previously Paid ber Previously Paid					r foun	d in the app	ropriate box	in colu	ıma 1.			